

"AMERICAN MEDICINE": TWO VOLUMES OF REAL VALUE

Extensive Literature on Sickness Costs.—Discussions of medical relief problems, in both medical publications and the press of recent years, have brought to the attention of physicians volume after volume, and also many articles, seemingly without end. In the beginning the temptation to purchase each work presented was naturally great; but this desire lessened as the inadequacy of the printed material made itself evident. Indeed, were it not for the importance of the subject, and the prominence given to it in public-welfare propaganda, together with the hope that a forthcoming publication might outline a clearer or a better solution of some of the problems involved, one would be inclined to abstain from adding such book and magazine literature to a library.

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"American Medicine" has 2,200 Physician Contributors.†—It is, therefore, refreshing to be able to call attention to a scholarly work of some 1,435 pages, entitled, "American Medicine: Expert Testimony Out of Court,"* edited and published by the "American Foundation," 565 Fifth Avenue, New York, and issued in two large, well-printed volumes, presenting compactly and in an interesting manner, reports, in the form of letters, from some 2,200 representative physicians of the United States; many of the comments dealing with the present status of American medicine, and also the much-discussed subject of ways and means for securing adequate medical care to all citizens, no matter what may be their social or economic position.

These contributors hail from every state of the Union, and represent all divisions of general prac-

tice, the specialties (both urban and rural), and medical education. In securing the information so compiled, six letters of inquiry were used: one going to men of twenty years or more in medical practice; a second to recent graduates; a third devoted to medical education; a fourth bearing on group practice; a fifth dealing with standards of surgical practice; the sixth covering group hospital insurance.

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Scope of the Report.—The scope of the report may be better appreciated by noting the subjects considered, some of which include:

What is "adequate" medical care?

Is the cost of it the only reason why it is not generally available?

How much modern scientific medical care of high grade exists at all?

If it were "available" now to all, would a large part of the population still choose quacks, cults and patent medicines?

How far is government responsible for the health of the individual?

What part should government have in promoting public health and providing medical service?

Who should pay for the medical care of the indigent sick?

Is the old line of demarcation between preventive and curative medicine any longer practicable or desirable?

Is improving medical education and the personnel of the medical profession the first step in improving the organization and distribution of medical care?

Is there too much specialization?

Can an individual doctor really furnish scientific medical care alone, or are organized laboratory and consultative assistance an absolute necessity?

In the medicine of the future will the practitioner function as an individual or as a member of a group?

What is the present status of the family doctor—is he "passing"; or is a new version of him just coming into being?

Is the "doctor-patient relation" an absolute sentimentality or has it a practical value in modern scientific medicine?

Is there too much surgery?

* To be obtained from the publisher at the price of \$3.50.

† The 2,200 contributors include the following California physicians:

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|---------------------------------------|--------------------------------------|-------------------------------------|
| Abbott, F. F., Ontario | Hines, Don Carlos, Palo Alto | Reed, J. Ross, Pasadena |
| Adams, Ben O., Riverside | Hoffman, Lawrence H., San Francisco | Reid, Eva Charlotte, San Francisco |
| Adams, Lemuel P., Oakland | Howson, Carl R., Los Angeles | Roberts, William Humes, Pasadena |
| Anderson, A. E., Fresno | Howard Burt F., Sacramento | Roblee, W. W., Riverside |
| Barrow, William H., San Diego | Huggins, W. L., Los Angeles | Rogers, L. B., Los Angeles |
| Beck, Walter, Berkeley | Hurd, A. H., Hollywood | Rowe, Jr., Melvin John, Los Angeles |
| Birnbaum, Walter, San Francisco | James, Martha Abigail, San Francisco | Ruggles, Howard E., San Francisco |
| Bloomfield, A. L., San Francisco | Johnson, Howard, San Francisco | Rude, Anna E., Los Angeles |
| Boardman, W. W., San Francisco | Kellogg, Wilfred H., Berkeley | Scholtz, Julius Robin, Los Angeles |
| Boonschaft, Louis, Los Angeles | Kerr, William J., San Francisco | Scholtz, Moses, Los Angeles |
| Brown, Philip King, San Francisco | Kiger, William H., Los Angeles | Schottstaedt, W. E. R., Fresno |
| Bumpus, Jr., H. C., Pasadena | King, Wenonah, Chico | Scott, Alfred J., Los Angeles |
| Burger, Thomas O., San Diego | Koefod, Hilmar O., Santa Barbara | Seid, Martin J., San Francisco |
| Chaffin, Rafe C., Los Angeles | Langstroth, Lovell, San Francisco | Shepard, W. T., Palo Alto |
| Chapman, John F., Pasadena | Legge, Robert T., Berkeley | Sherman, Julius, San Francisco |
| Chapman, V. A., Los Angeles | Lobingier, Andrew S., Los Angeles | Shutes, Milton H., Oakland |
| Cheney, William F., San Francisco | Loos, H. Clifford, Los Angeles | Smith, A. M., Oakland |
| Chipman, Ernest D., San Francisco | Mace, Lewis Sayre, San Francisco | Smith, R. T., Pomona |
| Clarke, R. Manning, Los Angeles | Mack, Clifford W., Livermore | Solland, Albert, Los Angeles |
| Coffin, Harry Welrose, Los Angeles | MacLeish, A. C., Los Angeles | Spiers, H. W., Los Angeles |
| Compton, C. S., Bakersfield | McKee, A. B., Redwood City | Stevens, Philip, Los Angeles |
| Condit, Joseph D., Pasadena | McKibben, Paul S., Los Angeles | Stevens, William E., San Francisco |
| Cummings, Roland, Los Angeles | McNeile, Lyle G., Los Angeles | Stork, Victor E., Los Angeles |
| Dock, George, Pasadena | Meyers, Alfred E., San Francisco | Sweet, Earl, Los Angeles |
| Doran, A. V., Vallejo | Millspaugh, W. P., Los Angeles | Taylor, Fletcher B., Oakland |
| Ebright, George E., San Francisco | Morrison, Wayland A., Los Angeles | Teass, C. J., San Luis Obispo |
| Eloesser, Leo, San Francisco | Mortensen, W. S., Santa Monica | Templeton, H. J., Oakland |
| Enloe, N. T., Chico | Myers, Glenn, Compton | Terry, Wallace I., San Francisco |
| Evans, George H., Berkeley | Myers, Thomas C., Los Angeles | Tholen, E. F., Los Angeles |
| Fairchild, Fred R., Woodland | Nevius, John W., Los Angeles | Thomas, Roy E., Los Angeles |
| Falk, Charles C., Eureka | Newell, R. R., San Francisco | Thornor, Moses, Santa Barbara |
| Fisher, Carl, Los Angeles | Nuzum, Franklin R., Santa Barbara | Trowbridge, D. H., Fresno |
| Franklin, Walter Scott, Santa Barbara | Olds, W. H., Los Angeles | Van Dalsem, William S., San Jose |
| French, J. Rollin, Los Angeles | Park, D. B., Vallejo | Van Nuys, R. G., Berkeley |
| Friedland, R. D., San Francisco | Peers, Robert A., Colfax | Varden, A. E., San Bernardino |
| Gelston, Clain F., San Francisco | Pierson, Philip H., San Francisco | Voorsanger, W. C., San Francisco |
| Graham, Harrington B., San Francisco | Podstata, V. H., San Francisco | Walker, G. W., Fresno |
| Gray, Horace, San Francisco | Porter, Langley, San Francisco | Wells, George S., Santa Barbara |
| Gundrum, F. F., Sacramento | Pottenger, F. M., Los Angeles | Wiel, Harry I., San Francisco |
| Haas, Sylvan L., San Francisco | Ramsay, Robert Ewart, Pasadena | Witherbee, O. O., Los Angeles |
| Harris, Henry, Berkeley | Read, J. Marion, San Francisco | Wood, W. A., Oakland |
| Hill, Harold P., San Francisco | Reed, Edward N., Santa Monica | |

How can self nominated specialists and ill qualified surgeons be controlled?

Now that the age of philanthropy is passing, how are hospitals to be supported?

Is insurance—3 cents a day—or direct use of tax funds the answer?

Should the United States have a ministry of health and set up a Federal Department of Health in the President's Cabinet?

Which, if any, of the following is the answer to present problems: the status quo? compulsory insurance? various forms of voluntary insurance? thoroughgoing state medicine? evolutionary increase in governmental authority and functioning, integrated with private practice?

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The American Foundation's Approach to the Subject.—While it is not possible, here, to dilate upon this welcome contribution to the literature on the medical-economic and welfare topics discussed by the 2,200 physicians who give expression to their individual views on different phases of the problems, it may be permissible to state that the two volumes are free from open or furtive support of preconceived solutions of the problems considered; and that the "American Foundation Studies in Government,"—which concerned itself in the years 1924-1935 with studies in the field of international law and international relations,—have approached this first study in the field of domestic relations in the broadest spirit. Witness the following from the foreword by Judge Curtis Bok, chairman of the Foundation's Governing Committee:

In sending our inquiry to doctors in the first instance there was no assumption that doctors alone could solve the problem. Social scientists, economists, government administrators have certainly a contribution to make. But it seemed to us that the group best able to define the problem in the first instance are the qualified medical men of the country. They should have a better idea of what constitutes adequate medical care than any economist or any government administrator. The very nature of their work, moreover, puts them in touch with conditions that are social and economic as well as medical and scientific. . . .

To the above may be added an excerpt or two from the Introduction by Truman G. Schnabel, associate professor of medicine in the University of Pennsylvania:

The inquiry sent to these contributors was in effect as follows:

Has your experience led you to believe that a radical reorganization of medical care in this country is indicated? If so, in what direction? If you do not believe that radical reorganization is indicated, what, if any, changes or revisions in the present system would you like to see made? What evolutionary possibilities would you stress?

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Doctor Schnabel adds that the objective of the Foundation's inquiry

was not to poll the medical profession upon anything whatever, but rather to assemble ideas. . . .

The intent and purpose of this report is to illumine and not to prove.

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The American Foundation Studies in Government.—Concerning this organization, and its governing committee of thirteen, it may be observed that the name of Dr. Robert A. Millikan, Director, Norman Bridge Laboratory of Physics, California Institute of Technology, adds lustre to

the roll; while in addition to the 2,200 contributors, the Foundation appointed a Medical Advisory Committee of 134 physicians, on which California is represented by

Philip King Brown, San Francisco; Thomas O. Burger, San Diego; William F. Cheney, San Francisco; Arthur L. Fisher, San Francisco; William J. Kerr, San Francisco; Eugene S. Kilgore, San Francisco; Langley Porter, San Francisco, and F. M. Pottenger, Los Angeles.

Speaking of the Medical Advisory Committee, it is stated:

The American Foundation would like to make it explicit that the members of the Medical Advisory Committee who are hereby joined with us in presenting this report, of course, assume no responsibility either individually or collectively, for any of the ideas quoted or presented. The Medical Advisory Committee endorses this report as a fair summary of the views of their colleagues that replied to the inquiry; the committee endorses the integrity of the work, agrees with The American Foundation in the usefulness of making it available and commends it to the study and consideration of medical men and of the public.

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How Subject Matter Is Divided.—For those who would know still more about the two volumes and how they cover the topic, "American Medicine," the following may suffice:

The report falls roughly into two divisions, as follows:

The first seven sections (890 pages) describe present trends in medical practice and in medical education. They analyze without reserve what is wrong and what is right with American medicine today.

The last four sections (440 pages) discuss various proposals—social and economic as well as medical—for "distributing" medical care and lowering its cost, and for organizing medical care and public health services.

In other words, in the first (and the larger) part of the report the doctors discuss chiefly medicine itself. In the latter part they venture into the field of social and economic theory. The much greater space and emphasis given to the discussion of medicine itself is not without significance. Medical scientists do not see any possibility of separating the social and economic aspects of medical care from the quality of medical care itself, as a dominant and controlling factor in all planning.

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The Place of These Studies in the Literature.—It is our belief that these two volumes of American Foundation Studies on "American Medicine" are, thus far, the most valuable contributions on the subjects discussed, and that they will be studied and referred to when other reports of much greater length, but containing the outpourings of theorizing laymen will have been almost forgotten, except for some of their statistical information.

Fact-finding studies and surveys have been much the vogue in recent years; so much so, that most folks are apt to view with suspicion many such efforts. Here in California, the sad experience of spending some \$35,000 of the California Medical Association's funds, under instructions from the House of Delegates, is still too vividly near not to make us share with others the mistrust concerning the value of some of these so-called surveys. For our part, we believe that, had the two volumes on "American Medicine" been off the press at the time the California Medical Association embarked on its survey adventure, some three years ago, and had the House of Delegates ordered the purchase, and given to each member, for his own library, the two

volumes on "American Medicine," then our Association would have had, for less than half the money it expended, twice or thrice of what we shall ultimately receive in either value or satisfaction from the California Medical-Economic Survey.

The editor believes that members who secure the two volumes on American Medicine (at the moderate price for both of only \$3.50), will not regret their purchase.

ON PROPOSED LAWS BEFORE THE CALIFORNIA LEGISLATURE

Present Status of Certain Bills.—Late numbers of the OFFICIAL JOURNAL have given brief comments on various public health measures that are now before the two houses of the California Legislature awaiting consideration and action. In this issue, the status of these bills, to date of April 16, as given in the official publications of the Legislature may be learned by scanning the excerpts found on page 347.

Below appear some memoranda received from the California Medical Association's Committee on Public Policy and Legislation, and these give additional information of interest. The attention of readers is called to the proposed law that would bring into existence in California an additional cultist examining board, this having already been passed out to the Assembly floor, for consideration and vote by that body. It is to be hoped that members of the California Medical Association appreciate the significance of that situation. Comment on the naturopathic measure and other bills is made below:

County Hospitals.—Not one of the bills designed to open up county hospitals to pay-patients has thus far passed the Legislature. Assembly Bill 51 was tabled in committee. After a lengthy hearing, Senate Constitutional Amendment No. 5 was finally sent to the floor of the Senate for a vote, but the Committee recommended that it "do not pass." Assembly Bill 1196 failed to receive a favorable vote in committee.

Chiropractic and Naturopathic.—Assembly Bill 1472, to set up a Naturopathic Board with broad powers, came out of committee with a favorable recommendation by a margin of one vote, and is now before the Assembly for action. A deluge of "mail lobbying" by its sponsors has been let loose in favor of this bill.

Two Chiropractic proposals to extend the scope of the Chiropractic Act are still in committee.

Code Bills.—The bills prepared by the California Code Commission to codify the existing laws relating to medical practice, dental practice, and nursing, etc., are on the floor of the Senate, awaiting passage of the budget bill before they can be acted upon.

Board of Health—Dentistry.—Assembly Bill 1262 increasing the membership of the State Board of Health from seven to eight, and requiring that one member be a dentist, has passed the Legislature and has been signed by the Governor.

Osteopathic Bills.—Assembly Bill 1880 (osteopaths in schools) passed the Assembly, but failed to secure favorable vote in the Senate committee. An identical measure—Assembly Bill 684—has now been started through the Assembly by the osteopaths.

Health and Hospital Insurance.—Assembly Bill 1132, sponsored by the Association of California Hospitals to provide hospitalization insurance, has passed the Assembly and is now before the Senate committee. No action has been taken in committee upon Senate Bill 121 (Williams) and Senate Bill 605 (McGovern). Assembly Bill 1283

(Welsh) and Assembly Bill 1491 (Boyle, Cronin, and McMurray) are still in the hands of a subcommittee of the Assembly Committee on Insurance.

Venereal Disease Bills.—Assembly Bill 1089 and Assembly Bill 2790 have been reported to the floor of the Assembly with recommendation, "do pass as amended." Assembly Bill 2790† is the measure having the approval of the State Board of Health.

Compensation Act Amendments.—None of the bills proposing to open up the Compensation Act to free choice of healer (not confined to M.D.'s) has been acted upon by the Committee.

Other State Association and Component County Society News.—Additional news concerning the activities and work of the California Medical Association and its component county medical societies is printed in this issue, commencing on page 331.

EDITORIAL COMMENT†

SYPHILIS AT THE CROSSROADS

The golden opportunity for the control of syphilis is at hand. The public conscience has been aroused. If medicine is ready to act, it can completely command the situation. Now is the time to pass the legislation that we have long desired. Teeth can be put into existing laws or the requisite new legislation can be passed. If medicine will accept the challenge of the public to show them the way, victory over venereal diseases is assured. The effect of the recent publicity given by the lay press to both syphilis and gonorrhea has aroused more public interest than any other medical subject for some time. It has stimulated frank discussion of venereal diseases in service clubs, women's organizations, and friends at the fireside. If the physician is listening, he will find that the majority of individuals are vitally interested in the problem. The family itself with growing children is vitally concerned; for certainly, no matter how careful the upbringing of children, a time may come when the tide of emotion may lead the growing youth into a venereal exposure. Alcohol adds unmeasurably to the danger. The example set by more experienced companions is rarely resisted by the young man early in college when they travel together to see the night life of the city. We cannot say that our own sons will not be so foolish, for we do not know all the secrets of their minds. To the average youth, sex is an exciting mystery, and no matter how thorough his moral training, a natural instinct will often set aside moral judgment.

The challenge is, therefore, thrown to the physicians. We must teach the danger that lies in promiscuous exposure, as well as an understanding of the disease itself, and proper protective measures. We must also be able to give hope to those who are already infected, and who consider their

† This department of CALIFORNIA AND WESTERN MEDICINE presents editorial comments by contributing members on items of medical progress, science and practice, and on topics from recent medical books or journals. An invitation is extended to all members of the California Medical Association to submit brief editorial discussions suitable for publication in this department. No presentation should be over five hundred words in length.

‡ See also letter on page 345.